



Hope,  
Resilience  
and Recovery  
for Everyone



The Friends and Family Guide  
to **Adult Mental  
Health Services**

The Texas Resilience and Recovery Model



**TEXAS**  
Health and Human  
Services

19D0477

# Table of Contents

<b>1. Introduction .....</b>	<b>1</b>
What if My Friend or Family Member is an Immediate Danger to Themselves or Others?.....	1
<b>2. Reaching Out for Local Help – Who to Contact.....</b>	<b>2</b>
Do You Qualify for Mental Health Services? Introducing The Texas Resilience and Recovery Model .....	2
<b>3. Your First Appointment .....</b>	<b>4</b>
What Do I Need to Bring? .....	4
Paying for Services .....	4
Uniform Assessment .....	4
<b>4. Available Services .....</b>	<b>6</b>
Medication Management .....	6
Crisis Services.....	6
Case Management .....	7
Rehabilitative and Skills Training .....	7
Housing.....	8
Employment and Education.....	10
Counseling.....	10
Specialized Programs .....	11
Co-Occurring Psychiatric Substance Use Disorder .....	12
Forensic Services.....	12
<b>5. Setting Goals and Choosing Strategies – Developing a     Treatment/Recovery Plan .....</b>	<b>13</b>
Building Strengths and Resilience – Discharge.....	13
Frequently Asked Questions .....	13
<b>6. Glossary – Technical Terms .....</b>	<b>16</b>
<b>7. Glossary – Recovery Team of Professionals.....</b>	<b>20</b>

# 1. Introduction

Having mental health needs is common. National statistics estimate 18 percent of all Americans 18 and older — almost one in five adults — struggle with mental health problems every year (Mental Health America, 2018).

At some point, most people experience life events or changes that impact their mental health leading to negative changes in behavior, feelings, relationships and job performance. This could be a sign additional support or mental health services are needed. Early identification and treatment increases resilience and the possibility of a quick recovery.

Your friend or family member is more than their mental health needs and their quality of life is important. They are a part of a family, a co-worker, and an important member of the community.

This guide helps you navigate adult mental health services in Texas and was developed by the Intellectual and Developmental Disabilities and Behavioral Health Services Section of the Texas Health and Human Services Commission.

## What if My Friend or Family Member is an Immediate Danger to Themselves or Others?

If your friend or family member is in crisis:

- Call the crisis hotline at your local mental health authority or local behavioral health authority; or
- Call 911

### How Do I Know if My Friend or Family Member Needs Crisis Services?

A person is in urgent need of mental health crisis services if they:

- Are an immediate danger to themselves or others
- Are at risk of serious mental or physical deterioration
- Believe they are a danger to themselves or others

## 2. Reaching Out for Local Help — Who to Contact

Texas Health and Human Services contracts with 37 Local Mental Health Authorities (LMHA) and two Local Behavioral Health Authorities (LBHA) to deliver mental health services in communities across Texas. There are several ways to locate the LMHA/LBHA in your area:

- Online: [apps.hhs.texas.gov/contact/search.cfm](https://apps.hhs.texas.gov/contact/search.cfm)
  - ▶ This site will allow you to locate the center by entering your county, city or ZIP code.
  - ▶ You can also call the referral line of the LMHA/LBHA in your area for confidential help 24/7.
- Phone: Call 2-1-1 and ask for the LMHA/LBHA in your area.

Once you have identified your LMHA/LBHA, give them a call.

### **Do You Qualify for Mental Health Services? Introducing The Texas Resilience and Recovery Model**

In Texas, the service delivery system for community-based mental health services is the Texas Resilience and Recovery (TRR) model. The TRR model acknowledges that people experiencing mental health issues are on a continuum of mental health and have natural supports and strengths which should be built upon to foster recovery. The modern framework of the TRR system uses an intensity-based approach to service delivery.

If a person is experiencing disruption in their daily life because of their mental illness, they might qualify for mental health services. A licensed clinician will meet with them to determine their mental health diagnosis and treatment needs.

### **The Screening and Assessment Process**

For a person to qualify for TRR Mental Health Services, they:

- Must be a Texas resident (the person doesn't need to prove they are a Texas resident; their statement is sufficient)
- Must meet financial criteria
- Must qualify for mental health services as determined by a uniform assessment. More information on levels of care can be found at [Utilization Management Guidelines and Manual webpage](#).

The [Adult Needs and Strengths Assessment](#) is completed at the initial visit and periodically through treatment. The questions are the same ones asked during

intake, where someone from the treatment/recovery team will complete this assessment. The assessment identifies which services best meet ongoing needs and helps track the progress toward recovery goals.

## 3. Your First Appointment

### What Do I Need to Bring?

If this is an intake appointment (to enroll you, or your friend, or family member in services for the first time or to re-enroll after a long break), bring the following with you to the appointment:

- Photo ID
- Proof of income (most current pay stub)
- Most current Medicaid card (if applicable)
- Proof of residence for last 30 days (utility bill or rental agreement)
- Name, address and phone number of any physician who has treated the person enrolling
- A list of all medications the person is taking or has taken
- A list that includes dates of any psychiatric hospitalizations for the person enrolling

### Paying for Services

Local mental health and behavioral health authorities complete a financial assessment for people seeking and receiving mental health services. Providers will first try to pay for services with federal Medicare or Medicaid funds, or bill a third-party resource such as private health insurance. A person might be asked to contribute to the cost of their own care, depending on their financial situation. People are charged for services based on their ability to pay.

### Uniform Assessment

Your friend or family member will meet with a clinician who will complete a uniform assessment to recommend appropriate services through a level of care. The uniform assessment includes a tool called the "Adult Needs and Strengths Assessment (ANSA)." The ANSA is detailed and might ask questions that make your friend or family member uncomfortable or embarrassed. These questions are important to ask. The answers help identify which services are most likely to meet their needs. The information provided is kept confidential within the limits of the law.

**Clients are reassessed periodically to keep track of any changes that might have happened throughout their treatment/recovery plan.** This also helps track their strengths and progress they have made toward their [recovery](#).

## **Assigning a Level of Care — Responding to the Level of Need**

The TRR adult mental health system has created levels of care (LOC) that respond to the person's identified needs. Everyone is unique, and so are their mental health needs. Some have intense and/or complex needs where a more intense level of care with a variety of complex services are more appropriate. However, when a person begins to build up resilience and has less complex needs, they will require a less intense level of care.

To learn more, visit the [Utilization Management Guidelines and Manual webpage](#).

## **Person-Centered Recovery Planning**

After an appropriate LOC is identified for you or your loved one, the person-centered planning (PCRP) begins where the person in services is in the driver's seat of their own recovery. PCRP uses a collaborative process in developing the recovery plan between the person, the treatment provider and person's natural supports. The goal of PCRP is to help the person achieve their goals along the journey to recovery.

## 4. Available Services

### Medication Management

- **Medication Training and Support:** This service offers information about medications and their possible side effects. This service is available in Levels of Care (LOC) 1M, 1S, 2, 3, 4 and 5. To learn more, visit the [Medication Management](#) webpage.
- **Pharmacological Management:** This service, provided by a physician or other prescribing professional, deals with the management of psychoactive drugs to treat the signs and symptoms of mental illness. This is available in all service levels. This service is available in all LOCs.

To learn more, visit the [Adult Services Array](#) webpage.

### Crisis Services

- **Crisis Follow-up and Relapse Prevention:** Services provided to people who are not an imminent danger of harm to themselves or others, but need help to avoid recurrence of the crisis event. This services helps:
  - ▶ Improve the person's reaction to the situation that led to the crisis event.
  - ▶ Ensure stability.
  - ▶ Prevent future crisis events.

Ongoing assessments determine crisis status and needs. They also provide up to 30 days of brief, solution-focused interventions to the person and their families. It helps in developing problem-solving techniques to help the person adapt and cope with the situation and stressors that led to the crisis event. The following services are available in all LOCs. To learn more, visit the [Crisis Units webpage](#).

- **Crisis Intervention:** Interventions in response to a crisis can be used to reduce symptoms of serious mental illness or emotional disturbance and to prevent admission to a more restrictive environment.
- **Crisis Residential Treatment:** Short-term, residential treatment close to home is provided for people with some risk of harm to themselves or others. These people might have fairly severe functional impairment and require direct supervision and care, but not hospitalization.
- **Crisis Stabilization Unit:** This service provides a short-term residential treatment to reduce acute symptoms of mental illness. Services are provided in a safe environment. Treatment is delivered by clinical staff supervised by a psychiatrist.
- **Crisis Transportation:** Transporting people receiving crisis or crisis follow-up and relapse prevention services from one location to another is a service. In accordance with state laws and regulations, transportation is provided by

law enforcement personnel or, when appropriate, by ambulance or qualified staff.

- **Extended Observation:** An up-to-48-hour emergency and crisis stabilization service. It provides emergency stabilization in a safe environment with clinicians (including medical and nursing professionals), supervised by a psychiatrist. There is immediate access to urgent or emergency medical evaluation and treatment, and people are transferred to a higher LOC when needed.
- **Mobile Crisis Outreach Team (MCOT):** A team of medical and mental health professionals who respond immediately to where a psychiatric crisis is occurring. MCOT is available 24/7 and responds to calls from the home, school, street or clinic. To learn more, visit the [Mobile Crisis Awareness Team webpage](#).

## Case Management

- **Routine Case Management:** Services that are primarily done on-site (at the LMHA/LBHA facility) that assist in gaining and coordinating access to necessary care and services that are appropriate to a person's needs. Available in LOCs 1M, 1S, 2, 5 and Adult Early Onset. To learn more, visit the [Case Management webpage](#).
- **Intensive Case Management:** Services that are primarily done in the community that assist a person in gaining and coordinating access to necessary care and services that are appropriate to their needs. Available in LOC-Transition Age Youth.

## Rehabilitative and Skills Training

- **Psychosocial Rehabilitation:** Social, educational, vocational, behavioral and cognitive interventions provided by members of a person's treatment/recovery team that help improve their ability to develop and maintain relationships and independent living skills. They also increase people's abilities to reach educational and occupational goals, as well as secure housing. This service includes treatment/recovery planning to facilitate recovery. It is available in LOCs 3, 4 and 5. To learn more, visit the [Adult Services Array webpage](#).
- **Skills Training and Development:** Training that deals with serious mental illness and symptom-related problems that interfere with a person's functioning. It provides opportunities for the person to acquire and improve skills needed to function appropriately and independently, and facilitate their community integration. This service is available in LOCs 1S, 2 and 5. To learn more, visit the [Adult Services Array webpage](#).
- **Illness Management and Recovery (IMR):** IMR is a curriculum used during Skills Training and Development and Psychosocial Rehabilitation and is designed to help people with SMI work with professionals to reduce their susceptibility to the illness and cope with their symptoms. IMR helps people

discover or rediscover their strengths and abilities for pursuing personal goals and developing a sense of identity, allowing them to grow beyond their mental illness. This service is available in LOCs 1S, 2, 3, 4 and 5. To learn more, visit the [Evidence-Based Practices and Resources webpage](#).

- **Supported Employment:** This program offers services designed to help people with serious mental illness (SMI) gain employment stability and provide individualized assistance to clients in choosing and obtaining competitive employment in regular community jobs. Activities include:
  - ▶ Developing skills to reduce or manage symptoms with SMI that might interfere with job performance.
  - ▶ Matching client skills and preferences to the best possible job match.
  - ▶ Assisting with job applications and interview preparation.
  - ▶ Advocating with potential employers.
  - ▶ Providing unlimited job supports.
  - ▶ Approaching each job experience as a learning experience where there are no failures, only lessons learned by the person to add on to their skillset to help plan for their next job.

This service is available in LOCs 1S, 2, 3, 4, 5, AEO and TAY. To learn more, visit the [Supported Employment webpage](#).

- **Permanent Supportive Housing:** This program offers activities to assist people in choosing, getting and keeping regular housing in the community. Services consist of assistance in finding and moving into habitable, integrated (for example, no more than 50 percent of units occupied by people with SMI) and affordable housing. This service is available in LOCs 1S, 2, 3, 4, 5, AEO and TAY. To learn more, visit the [Adult Mental Health Housing webpage](#).
- **Peer Support:** An evidence-based mental health model of care which consists of a qualified peer support provider with lived experience who assists people with their recovery from mental illness and substance use disorders. As an adjunct to professional clinical services offered by other team members, peer support is the process of giving and receiving encouragement and assistance to achieve long-term recovery. Peers offer emotional support, share knowledge, teach skills, provide practical assistance, and connect people with resources, opportunities and communities of support. This service is available in LOCs 1M, 1S, 2, 3, 4, 5, AEO and TAY. To learn more, visit the [Adult Mental Health Peer Support webpage](#).

## Housing

- **Healthy Community Collaborative (HCC):** The HCC program has services and supports for people experiencing homelessness with mental illness and/or substance use disorders including assistance with housing. Partners work together to help people get quality care and to help them understand the care they received. This service is available in all LOCs. To learn more, visit the [Adult Mental Health Housing webpage](#).

- **Permanent Supportive Housing:** This program offers activities to assist people in choosing, getting and keeping regular housing in the community. Services consist of assistance in finding and moving into habitable, integrated (for example, no more than 50 percent of units can be occupied by people with SMI) and affordable housing. This service is available in LOCs 1S, 2, 3, 4, 5 and Adult Early Onset. To learn more, visit the [Adult Mental Health Housing webpage](#).
- **Section 811:** This program provides rental assistance to people with disabilities who have low-income and are linked to long-term services. Availability of services is dependent on LOC and program availability (location). To learn more, visit the [Adult Mental Health Housing webpage](#).
- **Supported Housing Rental Assistance:** This type of assistance consists of funds provided to LMHA/LBHAs to assist people with SMI who are experiencing homelessness or at risk for becoming homeless. Funds are used for one-time/time-limited payments to keep people housed or moved quickly into housing, depending on the person's identified need. Other eligibility requirements apply and can be discussed through your LMHA/LBHA. Availability of services is dependent on LOC and program availability (location). To learn more, visit the [Adult Mental Health Housing webpage](#).
- **Project Access:** This housing program is administered by the Texas Department of Housing and Community Affairs in partnership with HHSC. It provides 10 Housing Choice Vouchers (tenant-based rental assistance) and support services provided by the LMHA/LBHA to people residing in or recently discharged from a state-funded psychiatric hospital bed. This service is available in all LOCs. To learn more, visit the [Adult Mental Health Housing webpage](#).
- **Projects for Assistance in Transition from Homelessness:** The PATH program provides eligible services to people experiencing homelessness, or at imminent risk of becoming homeless, and who have serious mental illnesses (eligible people might also have co-occurring substance use disorders). PATH offers the following services:
  - ▶ Outreach
  - ▶ Screening, diagnostic assessment and treatment
  - ▶ Habitation and rehabilitation
  - ▶ Community mental health services
  - ▶ Outpatient alcohol or drug treatment
  - ▶ Case management
  - ▶ Referral for primary health services, job training, educational services, human immunodeficiency virus (HIV) prevention activities, and relevant housing services
  - ▶ Assistance in obtaining income support services, including Supplemental Security Income and representative payee per appropriate regulations
  - ▶ Housing services, including planning for housing
  - ▶ Technical assistance in applying for housing assistance
  - ▶ Coordination of housing and services (improvement in coordinating these services). To learn more, visit the [Adult Mental Health Housing webpage](#).

## Employment and Education

- **Supported Employment:** This program offers services designed to help people with SMI gain employment stability and provide individualized assistance to clients in choosing and obtaining competitive employment in regular community jobs. Activities include:
  - ▶ Developing skills to reduce or manage symptoms with SMI that might interfere with job performance.
  - ▶ Matching client skills and preferences to the best possible job match.
  - ▶ Assisting with job applications and interview preparation.
  - ▶ Advocating with potential employers.
  - ▶ Providing unlimited job supports.
  - ▶ Approaching each job experience as a learning experience where there are no failures, only lessons learned by the person to add on to their skillset to help plan for their next job.

This service is available in LOCs 1S, 2, 3, 4, 5, AEO and TAY. To learn more, visit the [Supported Employment webpage](#).

- **Supported Education:** These services can be offered together with Supported Employment to help people pursue their educational goals. These services encourage people to think about and plan for their future, and promote career development to improve long-term work opportunities. This service is available in LOCs 1S, 2, 3, 4, 5, AEO and TAY.
- **Consumer Benefits:** People receiving services are routinely referred to the LMHA/LBHA's consumer benefits office. The benefits officer helps the person apply for Supplemental Security Income or Supplemental Security Disability Income. A benefits officer will help people with the claims process, review the claims, take notes and offer feedback to help people get the benefits they need. This service is available in all LOCs.

## Counseling

- **Cognitive Behavioral Therapy (CBT):** Person, family and group therapy used to lessen a person's symptoms of mental illness. It is also used to increase the person's ability to perform activities of daily living. CBT is the preferred treatment for adult counseling. This service includes treatment/recovery planning to improve recovery and resiliency. This service is available in LOCs 2, 4 and 5. To learn more, visit the [Adult Mental Health Counseling webpage](#).
- **Cognitive Processing Therapy (CPT):** Person therapy that aims to reduce or eliminate a person's symptoms of post-traumatic stress disorder. CPT is the favored treatment for adults with PTSD, including military veterans. This service includes treatment/recovery planning to improve recovery and resiliency. This service is available in LOCs 1S, 2, 3, 4 and 5. To learn more, visit the [Adult Mental Health Counseling webpage](#).

## Specialized Programs

- **Assertive Community Treatment (ACT):** An evidence-based practice that uses the person-centered recovery planning model. People who receive ACT services have a serious mental illness that gets in the way of living a quality life. Most have not improved after using traditional outpatient programs. ACT's goal is to facilitate community living, psychosocial rehabilitation and recovery. This program is available in LOC-4. To learn more, visit the [Assertive Community Treatment webpage](#).
- **Coordinated Specialty Care for First Episode of Psychosis (CSC):** Coordinated Specialty Care is a team-based model designed to meet the needs of people between 15 and 30 years old who have experienced their first episode of psychosis within the past two years. CSC emphasizes shared decision-making and a recovery-focused approach. This program is available in LOC-Early Onset and at select locations across Texas. To learn more, visit the [Coordinated Specialty Care webpage](#).
- **Transition-Age Youth (TAY):** Transition-Age Youth is used to identify people between 18 and 20 years old. This age group undergoes tremendous changes in all domains of life and need to be identified and engaged early. TAY programs promote environments where youth can get skills necessary for success in adulthood by providing access to evidence-based assessments, treatment models and recovery services. These programs are available under LOC-TAY.
- **Home and Community-Based Services – Adult Mental Health (HCBS-AMH):** HCBS-AMH is a program that provides home and community-based services beyond traditional mental health services to adults with serious mental illness who meet additional needs-based criteria. The HCBS-AMH program provides an array of services, appropriate to each person's needs, to enable them to live and experience successful tenure in their chosen community. Services are designed to support long-term recovery from mental illness and include the following:
  - ▶ Recovery Management
  - ▶ HCBS-AMH Psychosocial Rehabilitation
  - ▶ Community Psychiatric Supports and Treatment
  - ▶ Transition Assistance Service
  - ▶ Substance Use Disorder Services
  - ▶ Peer Support
  - ▶ Employment Services
  - ▶ Transportation Services
  - ▶ Adaptive Aids
  - ▶ Supported Home Living
  - ▶ Home-Delivered Meals
  - ▶ Host Home/Companion Care
  - ▶ Respite Care (short-term)
  - ▶ Assisted Living
  - ▶ Supervised Living Services

- ▶ Minor Home Modifications
- ▶ Flex Funds
- ▶ Nursing

To learn more, visit the [Home and Community-based Services webpage](#).

- **Peer Supported Community Re-entry:** A practice where qualified peer support providers work directly with incarcerated people before release from county jail to develop a treatment/recovery plan for transitioning back into the community and recovery-based, clinically appropriate services. The peer provider continues to support the person in their path to recovery, as they connect with services, housing, job development and integrate into positive, recovery-focused community settings.

## Co-Occurring Psychiatric Substance Use Disorder

- **Co-Occurring Psychiatric Substance Use Disorder:** A coordinated service practice that focuses on people who have conditions of mental health and substance use disorders. This coordinated care promotes concurrent treatment of best practices to assist these people with their recovery. To learn more, visit the [Co-Occurring Psychiatric Substance Use Disorder webpage](#).

## Forensic Services

- **Outpatient Competency Restoration (OCR):** Provides community-based services designed to restore competency for people who have been found by the court to be incompetent to stand trial. These people must also have been found by the court not to be a danger to others. Those found appropriate for OCR are eligible for the full range of services available to other people receiving mental health services. This service is available in LOCs 3 and 4.
- **Jail-based Competency Restoration:** Provides jail-based competency restoration services designed to restore competency for people who have been found by the court to be incompetent to stand trial.
- **Texas Correctional Office on Offenders with Medical or Mental Impairments:** The Texas Correctional Office on Offenders with Medical or Mental Impairments contracts with LMHA/LBHAs to provide mental health services to people on probation or parole. The LMHA/LBHAs work closely with parole and probation officers to help the person comply with the conditions of his or her release, specifically, as it pertains to engaging in mental health treatment. This service is available in LOCs 3 and 4.

## 5. Setting Goals and Choosing Strategies — Developing a Treatment/Recovery Plan

After the assessment process is done for your friend or family member and they are given a level of care, they will help put together their treatment/recovery plan that outlines their strength's, needs, goals and resources. This collaboration with the treatment/recovery team gives your friend or family member the opportunity to be a part of the process from the beginning, as well as discuss any concerns. This plan will also describe the services that will be provided to support building their resilience and recovery, and is reviewed and updated every 180 days to track progress.

Once a treatment/recovery plan is developed, a recovery team of professionals will be assigned to provide the services and supports. Sometimes one person might provide a few different types of services. To learn more, refer to the glossary toward the end of this guide.

### Building Strengths and Resilience — Discharge

Progress includes a reduction in symptoms and the improvement of strengths, both of which are essential to building the resilience your friend or family member will need throughout life. If a person who is receiving services has shown improvement in their assessment, achieved their goals, and maintained their recovery, they will be eligible for discharge from services. A person receiving services should not be discharged abruptly, but rather be involved in their own discharge planning in collaboration with their treatment/recovery team.

We hope the care provided within the Texas mental health system provides resilience, hope and recovery for those people receiving services. Each person can develop a healthy sense of identity and well-being, and can succeed in the workplace, their personal lives, and in the community. Your local community mental health center is always there to offer support.

### Frequently Asked Questions

- **What happens if I have a concern about the care my friend or family member was offered or receiving?**
  - The services providers at your LMHA/LBHA or local community mental health center are interested in helping you find solutions to the challenges faced by your friend or family member. First, try speaking to someone on the recovery/treatment team (case manager, therapist, doctor, etc.) about your concern. They will sit down and discuss any concerns you might have.

- ▶ If you are not satisfied with the outcome of your conversation, ask the receptionist at your center to connect you to their Clients Rights Officer. Each LMHA/LBHA has a Clients Rights Officer to help people resolve concerns related to your friend or family member's care.
- **What happens if my LMHA/LBHA is not addressing the concerns or complaints I have brought to their attention?**
  - ▶ If speaking with their Clients Rights Officer does not address your concern, you can contact the HHSC Office of the Ombudsman:

Office of the Ombudsman

Ombudsman for Behavioral Health

Texas Health and Human Services Commission

Mail Code H700

P.O. Box 13247

Austin, TX 78711

1-800-252-8154

- **What happens if my friend or family member is placed on a waiting list for services?**
  - ▶ If your friend or family member has Medicaid coverage, they **should not** be placed on a waiting list to receive mental health care at the LMHA/LBHA. If Medicaid does not cover them, they might be placed on a waiting list depending on the LMHA/LBHAs capacity.
- **At any time, your friend or family member experiences a psychiatric crisis, they are eligible for immediate services. See page 3 of this guide if you believe your friend or family member is experiencing a crisis.**
  - ▶ If your friend or family member is placed on a waiting list for services, a staff member from the LMHA/LBHA will contact you at least every 30 days to check in on your friend or family member's condition while waiting for services. Contact the LMHA/LBHA if you think their condition has worsened.
  - ▶ If your friend or family member remains on a waiting list a full year before entering services, a staff member from the LMHA/LBHA will contact you to schedule another full assessment to determine if their needs have changed.
- **What if my friend or family member has specific kinds of needs that cannot be addressed at my LMHA/LBHA?**
  - ▶ If the assessment done by the LMHA/LBHA shows your friend or family member has special types of needs that cannot be addressed at the center, your case manager or therapist will likely advise you about providers in the community with the qualifications, expertise and

- resources to address those needs. If center staff do not offer community provider referrals, just ask. They will help you identify resources.
- **How do I know if my friend or family member is eligible for financial help?**
    - ▶ All the LMHA/LBHAs accept Medicaid. Ask if your center helps in accessing other state/federal assistance programs or if they can provide information about local offices for these programs.
  - **What community resources can my friend or family member find helpful?**
    - ▶ Dial 2-1-1 – This program is committed to helping Texans connect with the services they need. Whether by phone or internet, the goal is to present accurate, well-organized, and easy-to-find information from over 60,000 state and local health and human services programs.

## 6. Glossary — Technical Terms

**Assessment** — a systematic process for measuring a person's service needs.

**Bipolar disorder** — a mental illness characterized by periods of elevated moods and periods of depression.

**Case Management** — the coordination of a variety of community services, monitoring the services and advocating for people suffering from ongoing mental health issues. Case management can also provide support for the families and friends of these people.

**Clinician** — a physician or other qualified person involved in the treatment and observation of living clients, as distinguished from one engaged in research.

**Confidential** — spoken, written and acted on, etc., in strict privacy or secrecy.

**Co-occurring psychiatric and substance abuse disorder (COPSD)** — a diagnosis that includes substance abuse and substance dependency problems, as well as psychiatric diagnoses.

**Deteriorate** — to become worse.

**Diagnosis** — the process of determining by examination the nature and circumstances of a diseased condition, or the decision reached from such an examination.

**Discharge plan** — a written plan that addresses the patient's current needs and goals, specifies the services to be provided and by whom. Among the areas that should be addressed in the discharge plan are: mental health services, case management, living arrangements, economic assistance, employment supports, transportation and medication.

**Evidence-based practice (EBP)** — "integrating individual clinical expertise with the best available external clinical evidence from systematic research." (Sackett D, 1996) EBP is the integration of clinical expertise, patient values and the best research evidence into the decision-making process for personal care.

**Intake** — a comprehensive assessment performed by a competent mental health professional or licensed practitioner of the healing arts to identify the person's behavioral health needs, which might include community-based as well as facility-based services.

**Intervention** — action taken to improve a situation, especially a medical, behavioral or social disorder.

**Level of care (LOC)** — a designation given to the HHSC standardized sets of mental health services, based on the [Utilization Management Guidelines and Manual](#), which specify the type, amount and duration of mental health rehabilitative services to be provided to a person.

**Local Mental Health Authority (LMHA)** — an entity to which HHSC delegates its authority and responsibility within a specific region for the planning, policy development, coordination, and resource development and allocation. LMHAs are also responsible for supervising and ensuring the provision of mental health services to people with mental illness in one or more local service areas. In several counties within the Dallas-Fort Worth Metropolitan Area, two agencies designated as a Local Behavioral Health Authority (LBHA) serve the same function as an LMHA.

**Licensed Practitioner of the Healing Arts (LPHA)** — is a licensed physician who can provide some or all of the mental health rehabilitative services and mental health targeted case management services.

**Motivational Interviewing (MI)** — a collaborative, person-centered form of guiding to elicit and strengthen motivation for change. It is an empathic, supportive counseling style that supports the conditions for change. Practitioners are careful to avoid arguments and confrontation, which tend to increase a person's defensiveness and resistance.

**Peer Support Services** — an evidence-based mental health model of care which consists of a qualified peer support provider with lived experience who assists people with their recovery from mental illness and substance use disorders.

**Person-centered Recovery Planning (PCRP)** — a collaborative process between the person, the treatment provider and the person's natural supports. The goal of this collaboration is to develop and implement a plan of action to assist the person in achieving their unique, personal goals along the journey to recovery.

**Post-traumatic Stress Disorder (PTSD)** — a mental health condition that's triggered by a terrifying event — either experiencing it or witnessing it. Symptoms can include flashbacks, nightmares, severe anxiety, and uncontrollable thoughts about the event.

**Psychosocial** — relates to a person's psychological development in, and interaction with, a social environment.

**Psychosocial Rehabilitation** — social, educational, vocational, behavioral and cognitive interventions provided by members of a person's recovery/treatment team that help improve a person's ability to develop and maintain relationships, occupational or educational achievement, independent living skills and housing. This service includes recovery/treatment planning to facilitate recovery.

**Psychoactive Medication** — a chemical substance that crosses the blood-brain barrier and acts primarily upon the central nervous system where it affects brain

function, resulting in alterations in perception, mood, consciousness, cognition and behavior.

**Psychoeducation** — education offered to people with a mental health condition and their families to help empower them and cope with their condition in an optimal way.

**Psychotherapy** — a therapeutic interaction or treatment contracted between a trained professional and a client, patient, family, couple or group.

**Psychosis** — an abnormal condition of the mind that involves a "loss of contact with reality." People experiencing psychosis might exhibit personality changes and thought disorder. Depending on its severity, this can be accompanied by unusual or bizarre behavior, as well as difficulty with social interaction and impairment in carrying out daily life activities.

**Qualified Mental Health Professional – Community Services** — This person received special training and credentialing enabling them to deliver some or all of the mental health rehabilitative services and mental health targeted case management services.

**Recovery** — a process of change through which people improve their health and wellness, live a self-directed life, and strive to reach their full potential.

**Rehabilitation** — a treatment (or multiple treatments) designed to facilitate the process of recovery from injury, illness or disease.

**Relapse** — the return of an illness or behavior after a period of improvement.

**Resilience** — having the ability to overcome challenges and adapt to stressful or life-changing situations.

**Respite Care Service** — a short-term period of care for a service recipient who has mental health, intellectual/developmental, behavioral or physical challenges. The purpose is to provide the service recipient's family or regular caregiver with a time-limited break from the routine care that they provide.

**Schizophrenia** — a mental disorder often characterized by abnormal social behavior and failure to recognize what is real.

**Screening** — the initial contact between a clinician and potential client for gathering demographic data and other information, as necessary, to determine eligibility and need for services.

**Serious Mental Illness (SMI)** — an adult can be considered to have an SMI, and can receive mental health services, if they are experiencing significant functional impairment because of a mental health disorder, as defined by the Diagnostic and Statistical Manual of Mental Disorders, 5<sup>th</sup> Edition (DSM-5), including:

- Major depressive disorder, including single episode or recurrent major depressive disorder
- Post-traumatic stress disorder
- Schizoaffective disorder, including bipolar and depressive types
- Obsessive compulsive disorder
- Anxiety disorder
- Attention-deficit disorder
- Delusional disorder
- Bulimia nervosa, anorexia nervosa or other eating disorders not otherwise specified
- Any other diagnosed mental health disorder

A single diagnosis of substance abuse, an intellectual developmental disorder (IDD), a developmental disorder (e.g., autism), or any other organic conditions (e.g., head injury or dementia) does not meet the SMI standard.

**Social Security Disability Income (SSDI)** — this program is the largest of several federal programs that provide assistance to people with disabilities. It is administered by the Social Security Administration and only persons who have a disability and meet medical criteria may qualify for benefits.

**Supplemental Security Income (SSI)** — a federal income supplement program funded by general tax revenues (not Social Security taxes). It is designed to help aged, blind and disabled people who have little or no income. It also provides cash to meet basic needs for food, clothing and shelter.

**Symptomology (also, symptomatology)** — the set of symptoms characteristic of a medical condition or exhibited by a patient.

**Wraparound Approach** — a philosophy of care with a defined planning process used to build constructive relationships and support networks among children and youth with emotional or behavioral disorders and their families. It is community-based, culturally relevant, individualized, strengths-based and family-centered.

## 7. Glossary — Recovery Team of Professionals

**Psychiatrist** — A physician who specializes in psychiatry. The psychiatrist will provide a mental health diagnosis, prescribe medications and provide psychoeducation.

**Registered Nurse** — A person who is licensed by the nursing board to practice as an advanced practice nurse on the basis of completion of an advanced educational program.

**Licensed Vocational Nurse** — A person who holds a license as a vocational nurse.

**Case Manager** — The case manager coordinates services, keeps track of progress on the recovery plan, makes referrals to community resources, and advocates for your friend or family member.

**Qualified Mental Health Professional-Community Services** — This person received special training in a variety of evidence-based practices that help address behavioral health needs related to your friend or family member’s mental health diagnosis.

**Counselor** — Therapists are licensed mental health clinicians who received training in therapies that address emotional needs related to your friend or family member’s mental health diagnosis. They are usually Licensed Professional Counselors, Licensed Clinical Social Workers or Licensed Marriage and Family Therapists, among others.